

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | AT       |        | 9-13-00  |
| O.I.P.E. CLASSIFIER       | JW       | 65740  | 10-19-00 |
| FORMALITY REVIEW          |          |        |          |
| RESPONSE FORMALITY REVIEW |          |        |          |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
| 1              | 9/19/00 |
| 2              | 9/19/00 |
| 3              | 9/19/00 |
| 4              | 9/19/00 |
| 5              | 9/19/00 |
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| Claim          | Date    |
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| Final Original |         |
| 51             | 9/19/00 |
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| Claim          | Date |
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| Final Original |      |
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| 148            |      |
| 149            |      |
| 150            |      |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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